

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL****FOR: HEALTH CARE FINANCING ADMINISTRATION**

1. TRANSMITTAL NUMBER:

0 1 - 0 8

2. STATE:

VA

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL
SECURITY ACT (MEDICAID)

4. PROPOSED EFFECTIVE DATE

08/02/01

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:

42 CFR, Part 435

7. FEDERAL BUDGET IMPACT:

a. FFY 2001 \$ 82,626

b. FFY 2002 \$ 82,626

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Attachment 1.2-D Pages 1 through 5

Attachment 2.2-A Pages 4a, 5, 6

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable):

Attachment 1.2-D Pages 1 through 5

Attachment 2.2-A Pages 4a, 5, 6

10. SUBJECT OF AMENDMENT:

Medicaid Central Processing Unit

11. GOVERNOR'S REVIEW (Check One):

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL☒ OTHER, AS SPECIFIED:

Secretary of Health and Human Resources

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME:

Eric S. Bell

14. TITLE:

Director

15. DATE SUBMITTED:

7/9/2001

16. RETURN TO:

DMAS

600 East Broad Street, Suite 1300

Richmond, VA 23219

ATTN: Regulatory Coordinator

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED:

8/6/01

18. DATE APPROVED:

October 18, 2001

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:

8/2/01

20. SIGNATURE OF REGIONAL OFFICIAL:

Claudette V. Campbell

21. TYPED NAME:

CLAUDETTE V CAMPBELL

22. TITLE:

ASSOCIATE REGIONAL ADMINISTRATOR

23. REMARKS:

DIVISION OF MEDICAID &
STATE OPERATIONS

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

Pursuant to the provision of Title XIX, eligibility determinations are performed by state staff employed by the Department of Medical Assistance Services and assigned to the Central Processing Unit or by staff supervised by the State Department of Social Services and administered by county and city departments of social services.

A. Responsibilities of the Department of Medical Assistance Services' Central Processing Unit.
Determination of eligibility.

1. Certification of Medicaid eligibility for children who apply for the State Children's Health Insurance Program but are screened for Medicaid eligibility and found eligible.
2. Acceptance of applications for medical assistance under Title XIX submitted on behalf of children screened for SCHIP and found potentially eligible for Medicaid.
3. Responsibilities identified in this item shall apply to state staff.
 - a. Determination of initial eligibility.
 - b. Certification of applicants found eligible.
 - c. Recertification on basis of periodic reviews of eligibility.
 - d. Notification to the Department of Medical Assistance Services and to the applicant/recipient of the initial eligibility decision and any subsequent change in eligibility status.
4. Fair hearing (appeals).
 - a. Provision by the eligibility staff of information to the applicant/recipient regarding his right to appeal and the method of obtaining a hearing.
 - b. Preparation and submission to the Department of Medical Assistance Services Division of Appeals, a statement of facts covering the case circumstances and the action taken by the Central Processing Unit eligibility staff.
 - c. Participation by the Central Processing Unit eligibility staff in the appeal hearing relating to its action.

TN No. <u>01-08</u>	Approval Date <u>OCT 18 2001</u>	Effective Date <u>08/01/01</u>
Supersedes		
TN No. <u>85-02</u>		

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

B. Responsibilities of the Social Services Department. Determination of eligibility

1. Certification by local social services agency superintendents/directors of current public assistance recipients and foster care children of the local social services department.
2. Acceptance of applications for medical assistance under Title XIX.
 - a. By the local department of social services of the city or county in which the applicant resides, or
 - b. By State employees located in designated institutions.
3. Responsibilities identified in this item shall apply to both local and sState staff.
 - a. Determination of initial eligibility.
 - b. Certification of applicants found eligible.
 - c. Recertification on basis of periodic reviews of eligibility.
 - d. Notification to the Department of Medical Assistance Services and to the applicant/recipient of the initial eligibility decision and any subsequent change in eligibility status.

C. Responsibilities of the Social Services Department. Social services.

1. Determination by local departments of social services of eligibility for social services.
2. Provision by local departments of social services as specified in the State Plan for services to individuals determined eligible.

D. Fair hearing (appeals).

1. Provision by the local department of social services of information to the applicant/recipient regarding his right to appeal and the method of obtaining a hearing.
2. Prepare and submit to the Department of Medical Assistance Services a statement of facts covering the case circumstances and the action taken by the local social services department.
3. Participation by the local social services department in the appeal hearing relating to its action.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

E. Fraud.

1. Investigation by the local department of social services of situations involving eligibility in which there is no reason to suspect that there has been deliberate misrepresentation by an applicant/recipient with intent to defraud.
2. Report to the Department of Medical Assistance Services in instances where there is evidence that fraud may exist.

F. Quality Control. Establishment of a system of quality control according to regulations issued by the Department of Health and Human Services which specify the function as the responsibility of the State's Title IV-A Program.

G. Non-discrimination. Assurance that, in the determination of eligibility and the provision of social services, there will be no discrimination on the basis of race, color or national origin.

H. Staffing.

1. Provision of staff in local social services departments, in accordance with prevailing State standards, adequate to provide for eligibility determinations and the provision of social services.
2. Designation of state staff members to serve as coordinators between the two state agencies and as consultants to the local departments of social services.
3. Provision of state staff to provide quality control in relation to eligibility determination and social services.

I. Staff development and recruitment.

1. Provision by the State Department of Social Services in cooperation with the Department of Medical Assistance Services, of a comprehensive program of education and in-service training for social work staff working in the Medical Assistance Program.
2. Consultive services to Department of Medical Assistance Services in its staff development program.
3. Recruitment by Department of Social Services of social work staff for state and local social services departments.

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J. Maintenance of records.

1. Maintenance by local departments of social services of individuals records containing pertinent facts about the applicant's/recipient's application; determination of initial and continuing eligibility, and need for and provision of social services.
2. Maintenance of statistical records and submittal of reports as required by the Department of Health and Human Services.

K. Review of local operations.

1. Planned examination and evaluation by state representatives of local departments of social services operations, including reporting of findings.
2. Policy interpretation by State staff to local departments on a continuing basis.
3. Corrective action when a policy is not being implemented properly.

L. Exchange of information.

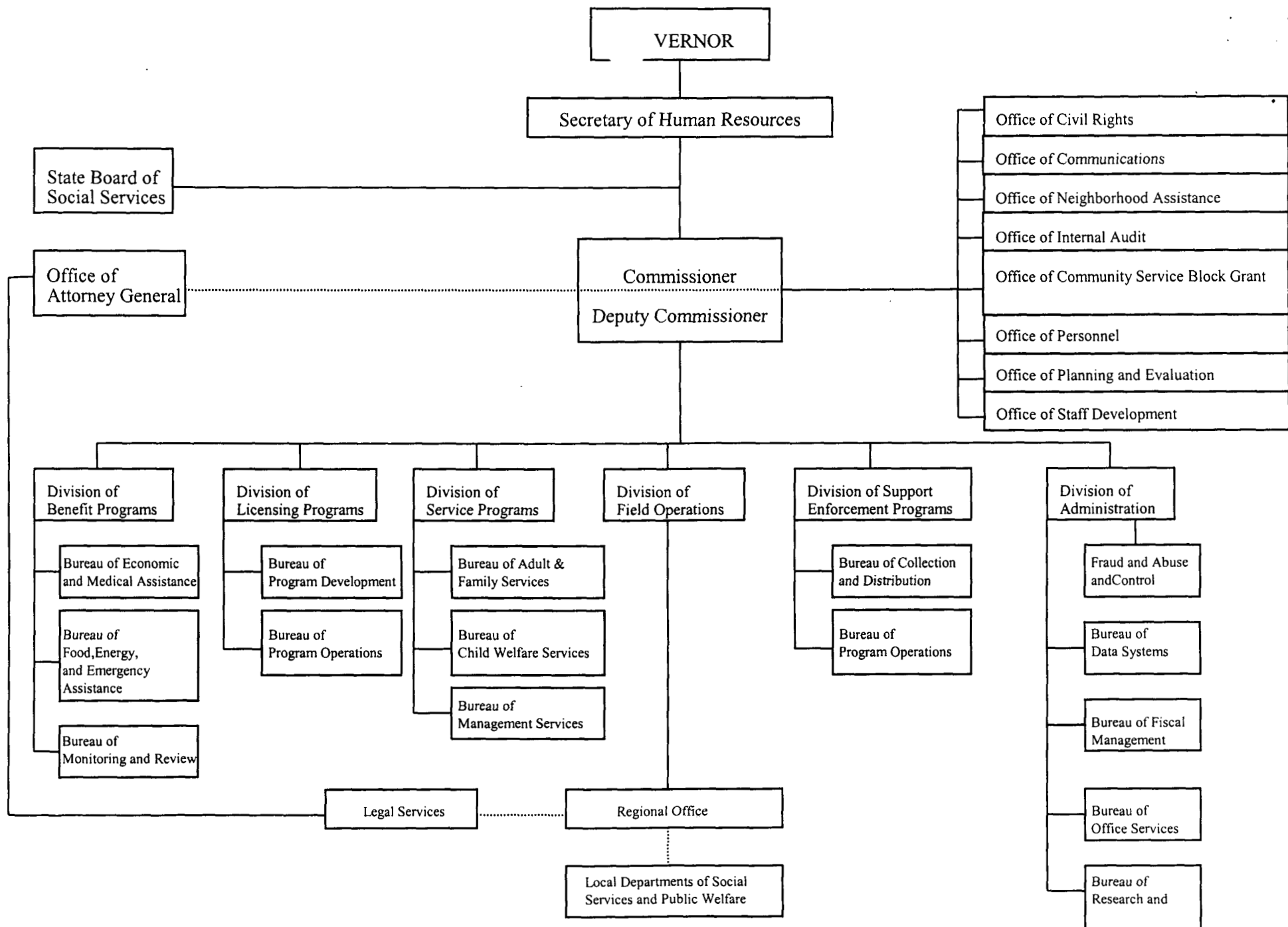
1. Provision by the local social services department to the Department of Medical Assistance Services of pertinent information regarding applicants/recipients including findings with respect to initial and continuing eligibility.
2. Provision by the local social services department to the local health department of information regarding health needs and medical problems identified in the counseling process.
3. Furnishing by the local social services department to the local health department, information regarding social services needed and rendered which is pertinent to the provisions of medical care.
4. Provision of a continuing flow of information on State and local levels with respect to available social services.
5. Transmittal to Department of Medical Assistance Services of all Department of Social Services' material issued to local departments of social services related to the Medical Assistance Program.
6. Furnishing the Department of Medical Assistance Services pertinent statistical records and reports on both State and local levels.

M. Organization and staffing. The organizational chart of the Virginia Department of Social Services, and the organization and staffing of the Divisions of Benefit Programs, Service Programs, and Regional Offices follow.

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Supersedes
TN No. 85-02

Approval Date OCT 18 2001

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

COVERAGE AND CONDITIONS OF ELIGIBILITY

Agency	Citation	Groups Covered
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A. Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued)

IV-A
CPU 1902(a)(10)(A)(i)
(IV) and
1902(l)(1)(A) and (B)
of the Act

8. Pregnant women and infants under 1 year of age with family incomes up to 133 percent of the Federal poverty level who are described in section 1902(a) (10)(A)(i)(IV) and 1902(l)(A) and (B) of the Act. The income level for this group is specified in Supplement 1 to ATTACHMENT 2.6-A.

☐ The State uses a percentage greater than 133 but not more than 185 percent of the Federal poverty level, as established in its State plan, State legislation, or State appropriations as of December 19, 1989.

IV-A
CPU 1902(a)(10)(A)(i)
(VI) 1902(l)(1)(C) of
the Act

9. Children:

a. who have attained 1 year of age but have not attained 6 years of age, with family incomes at or below 133 percent of the Federal poverty levels.

b. born after September 30, 1983, who have attained 6 years of age but have not attained 19 years of age, with family incomes at or below 100 percent of the Federal poverty levels.

Income levels for these groups are specified in Supplement 1 to ATTACHMENT 2.6-A.

TN No. 01-08

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Effective Date 08/01/01

Supersedes

TN No. 93-04

HCFA ID: 7983E

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

COVERAGE AND CONDITIONS OF ELIGIBILITY

Agency	Citation	Groups Covered
		A. <u>Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued)</u>
	1902(a)(10)(A)(i)(V) and 1905(m) of the Act	10. Individuals other than qualified pregnant women and children under item A.7. above who are members of a family that would be receiving AFDC under section 407 of the Act if the State had not exercised the option under section 407(b)(2)(B)(i) of the Act to limit the number of months for which a family may receive AFDC.
IV-A CPU	1902(e)(5) of the Act	11. a. A woman who, while pregnant, was eligible for, applied for, and receives Medicaid under the approved State plan on the day her pregnancy ends. The woman continues to be eligible, as though she were pregnant, for all pregnancy-related and postpartum medical assistance under the plan for a 60-day period (beginning on the last day of her pregnancy) and for any remaining days in the month in which the 60th day falls.
	1902(e)(6) of the Act	b. A pregnant women who would otherwise lose eligibility because of an increase in income (of the family in which she is a member) during the pregnancy or the postpartum period which extends through the end of the month in which the 60-day period (beginning on the last day of pregnancy) ends.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

COVERAGE AND CONDITIONS OF ELIGIBILITY

Agency	Citation	Groups Covered
		A. <u>Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued)</u>
IV-A CPU	1902(e)(4) of the Act	12. A child born to a woman who is eligible for and receiving Medicaid as categorically needy on the date of the child's birth. The child is deemed eligible for one year from birth as long as the mother remains eligible or would remain eligible if still pregnant and the child remains in the same household as the mother.
	42 CFR 435.120	13. Aged, Blind and Disabled Individuals Receiving Cash Assistance
		<input type="checkbox"/> a. Individuals receiving SSI.
		This includes beneficiaries' eligible spouses and persons receiving SSI benefits pending a final determination of blindness or disability or pending disposal of excess resources under an agreement with the Social Security Administration; and beginning January 1, 1981 persons receiving SSI under section 1619(a) of the Act or considered to be receiving SSI under section 1619(b) of the Act.
		<input type="checkbox"/> Aged
		<input type="checkbox"/> Blind
		<input type="checkbox"/> Disabled

TN No. 01-08
Supersedes
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DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Region III

Suite 216, The Public Ledger Building
150 S. Independence Mall West
Philadelphia, PA 19106-3499

OCT 18 2001

Eric S. Bell, Director
Department of Medical Assistance Services
600 E. Broad Street, Suite 1300
Richmond, VA 23119

Dear Mr. Bell:

We have reviewed State Plan Amendment (SPA) 01-08, which modifies the entities that determine Medicaid eligibility. This SPA is acceptable. Therefore, we are approving SPA 01-08 with an effective date of August 2, 2001.

If you have any questions, please contact Jake Hubik at 215-861-4181.

Sincerely,

Claudette V. Campbell
Claudette V. Campbell
Associate Regional Administrator
Division of Medicaid and State Operations

Enclosure